

GA-504 CoC Grant Renewal Application

Due: October 16

2014

The Augusta – Richmond County (GA-504) Continuum of Care (CoC) is issuing the attached guidance for the FY2014 Notice of Funding Availability (NOFA) competition. This guidance applies to all renewing Continuum of Care grants for permanent housing, transitional housing, HMIS and supportive services only as well as for new applications for rapid re-housing and bonus permanent supportive housing in the GA-504 CoC. This notice is being announced in accordance with HUD's NOFA for the HUD Continuum of Care programs (Docket No. FR-5800-N-30)

Renewal Projects Only



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2014 Augusta - Richmond County Continuum of Care Review Application Renewal Projects ONLY

General Information

1.	Project Applicant Information: a. Name of Organization:		
	b. Organization Type☐Non-profit 501 (c)(3)☐ Other: Describe:	Unit of Government	☐ Public Housing Authority (PHA)
	DUNS Number:		
2.	Sub-Recipient / Sponsor Organ a. Name of Organization:	` ,	
	b. Organization Type Non-profit 501 (c)(3) Other: Describe:		☐ Public Housing Authority (PHA)
	DUNS Number:		
3.	Contact person for this applica	ation:	
	b. Title:		
	c. Phone:		
	d. Email:		
4.	Project Name:		
5.	County (ies) where project is le	ocated:	
6.	HUD Project Type: Permanent Supportive Housing Facility-based Scattered Site Supportive Services Only	☐ Transitional Housing☐ Facility-based☐ HMIS	Rapid Re-housing Scattered Site
7.	HUD 2014 Project Funding Red	quested:	



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8. Are any of the following changes proposed to the	ine grant":
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Reduction to grant proposed due to underutilization?

Change current project type to Rapid Re-Housing through CoC's competitive reallocation process, and submit a new application in the competition?

If any changes are proposed, please provide an explanation in the space below.

Program Overview and Priority Alignment

- 1. Please provide a brief, but complete, summary of your project. (750 characters maximum)
- 2. As specified in the Governance Charter, the Augusta Richmond County CoC seeks to align itself with the HUD Strategic Plan, as well as with the USICH "Opening Doors" plan. While much of the scored information will be taken from agency and program APRs and HMIS, please respond to the following questions, addressing the various objectives of the Augusta Richmond County CoC. For questions that reference project performance, please include the applicable project performance data that was submitted for the most recent APR.

Objective 1: Increase Progress towards Ending Chronic Homelessness

Question	Yes/No
pes the project prioritize client selection based on duration of omelessness and vulnerability?	
pes the project accept all clients regardless of substance use history, or irrent use?	
pes the project accept clients who are diagnosed with, or show mptoms of, a mental illness?	
pes the project accept clients regardless of criminal history?	
pes the project accept clients regardless of income or financial sources?	
pes the project use a harm-reduction model for drugs and/or alcohol se?	
pes the project include mandatory case management as a condition of maining in the program?	

Please briefly explain any "no" answers for A-F, and "yes" answer for G (300 characters maximum, per explanation).



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Objective 2: Increase Housing Stability

What was the project performance regarding housing stability (APR Q36), in your last submitted APR? Agencies who have not had an APR due to HUD yet (new project/newly transferred project), please use data from HMIS or APRICOT/ALICE on clients served between 9/1/2013 and 8/1/2014.
APR Q36, Measure 1 (Actual percent of persons who accomplished this measure):

Please briefly explain how your agency plans to improve, or maintain, the housing stability of project participants (500 characters maximum).

Objective 3: Increase Project Participant Income

What was the project performance regarding income (APR Q24), in your last submitted APR? Agencies who have not had an APR due to HUD yet (new project/newly transferred project), please use data from HMIS or APRICOT/ALICE on clients served between 9/1/2013 and 8/1/2014.

- a. APR Q24a Adults with Only Earned Income Leavers (last column):
- b. APR Q24a Adults with Only Other Income Leavers (last column):
- c. APR Q22a2 Total Adult leavers (bottom row, "adult" column):

Please briefly explain what steps your agency has in place to assist participants in increasing their income. (500 characters maximum).

Objective 4: Increase the Number of Participants Obtaining Mainstream Benefits

What was the project performance regarding mainstream benefits (APR Q26), in your last submitted APR? Agencies who have not had an APR due to HUD yet (new project/newly transferred project), please use data from HMIS or APRICOT/ALICE on clients served between 9/1/2013 and 8/1/2014.

- a. APR Q26a2 "Total 1+Source(s)":
- b. APR Q7 "Total number of Leavers": _____
- c. Please briefly describe how your agency plans to increase the percentage of participants who access mainstream benefits (500 characters maximum).

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Objective 5: Using Rapid Re-Housing as a Method to Reduce Family Homelessness (New Projects Only)

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Financial & Project Information

1.	Start and end date of your most recent HUD award (current contract year): to		
2.	Total amount of award: \$		
3.	Amount of funds not yet drawn down: \$		
4.	Do you anticipate you will have unexpended funds at the expiration date of your current contract? Yes No If yes, how much? \$		
5.	Have you had unexpended HUD funds at the expiration of grant terms in the past 3 years? Yes No If yes, how much? 2013 \$		
	2012 \$		
	2011 \$		
6.	Does the applicant have any outstanding federal debt? Yes No If yes, please provide an explanation of debt owed and repayment arrangements (250 characters maximum).		
7.	When was your most recent HUD monitoring visit (if applicable)?		
	Please submit a copy of your most recent HUD monitoring report with your application (along with any response, corrective action, or other related documents).		
8.	Does the agency have any open (unresolved) monitoring findings or concerns from any governmental or foundation funder? If yes, please identify the finding or concern and explain a		



corrective plan of action (500 characters maximum).

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9. Project Utilization - Participants Served

	Contracted # of Participants/ Households to be served (From HUD Project Application)	Actual Annual # of Participants / Households Served (From most recent APR submitted to HUD)
Number of Households With Children (Families)		
a. Number of Households		
b. Number of Adults		
c. Number of Children		
Number of Households without Children		
(Individuals, Couples w/no children)		
a. Number of Adults		
Number of Households with ONLY Children		
(unaccompanied youth 17 yrs. or younger)		
a. Number of unaccompanied youth 17 yrs. or		
younger		
Total		

10. Project Utilization (Housing Programs Only)

a.	Number of contracted beds:	
b.	Number of bed dedicated to people who are chronically homeless:	
C.	Number of beds not dedicated to people who are chronically homeless, but that will be prioritized for the chronically homeless:	
d.	Total number of units under contract:	

e. Total number of units being utilized on September 30, 2014:



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11. Sub-Populations (ALL Programs)

What percentages of total current clients being served fall into the sub- populations below?	Percentage Served
Chronically Homeless Individuals	
Chronically Homeless Families	
Severely Mentally III	
Chronic Substance Abuse	
Veterans	
Persons with HIV/AIDS	
Victims of Domestic Violence	
Households with Children	
Unaccompanied Youth (less than 18 years old)	
Developmental Disabilities	
Physical/Chronic Health Issues	

12.	. Does your project use Energy Star equipment/appliances and/or plan for the purchasing of Energy
	Star products for new or replacement equipment/appliances?
	□ Voc □ No

Yes	Nο







Match and Leveraging

Using the guidelines included with this application, please complete the applicable match and leveraging charts. Please add addition rows, as necessary.

Cash Match: Please list the primary sources of match funds (to equal 25% of total costs), funding amounts received in the past 12 months, and the beginning year of continuous history of funding from each source.

Source	Amount Received in the Past 12 Months	Funding Received Since (Year)
	Total	

In-Kind Match: Please list the primary sources of in-kind match resources (to equal 25% of total costs), equivalent cash value received in the past 12 months, and the beginning year of continuous support from each source.

Source	Value Received in the Past 12 Months	Support Received Since (Year)
	Total	

Leveraging (cash): Please list the primary sources of leveraged funds, and the funding amounts committed.

Source	Dollar Amount of Committed Funding
Total	

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Leveraging (in-kind): Please list the primary sources of leveraged in-kind resources, and the equivalent cash value of the resources committed.

Source	Dollar Equivalent of Committed Resource
Total	

ASSURANCES

To the best of my knowledge and belief, all information in this application is true and correct. The governing body of the applicant has duly authorized this document and the applicant will comply with the following:

- Applicant will complete the HUD Project Application forms with the same information as contained in this application unless the Augusta – Richmond County CoC Project Review Scoring Committee has made adjustments during the rating/ranking process. Those adjustments would supersede this document and are included in the Project Ranking Letter sent to each applicant.
- Applicant agrees to participate fully with this community's Homeless Management Information System (HMIS) (Pathways Community Network or APRICOT/ALICE).

Name:		
(please type)		
Title:		
Phone:		
Email:		
Signature of Authorized Representative:		
☐ "X" indicates	electronic signature submitted	
Date:		



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MATCH and LEVERAGING

Project applicants are requested to report match and leveraging for each project. For the 2013 CoC Competition, HUD guidelines request projects to report match and leveraging where there are commitment letters on file that are dated within 60 days of the CoC application deadline. Projects without sufficient match and/or leveraging may be determined ineligible. New PSH project applications must submit written commitments of match and leverage within each application package by the December 27, 2013 deadline. (Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties (18 U.S.C. §§ 1001, 1010, 1012, 31 U.S.C. §§ 3729, 3802). Information on Match requirements can be found in the CoC Interim Rule at 24 CFR 578.72.

Match (Cash or In-Kind Resources)

Except for leasing, match resources must equal to at least 25% of the total requested HUD funding, including project and administrative costs. Please note, Cash and In-Kind Match must qualify as eligible program expenses under the CoC interim rule.

Match resources for <u>new</u> projects must have a written commitment in-hand at time of application, and copies of these commitment documents must be submitted with this Review Application. A written commitment may include signed letters, memoranda of agreement, or other documented evidence of a commitment. All written commitments must be signed and dated by an authorized representative, and should include the name of the contributing organization, the type of contribution (cash, child care, case management, etc.), the value of the contribution, and the date that the contribution will be available. The written commitment must include the project name and be addressed to the project applicant or non-profit.

Leveraging (Cash or In-Kind Resources)

The CoC goal for all leveraged resources (including match) is 150% of the grant amount. For this section, please only report leveraged resources outside of the match resources listed above to insure no duplication.



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